SENDER: COMPLETE THIS SECTION	COMP! ETE THIS SECTION ON DELIVERY
 Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse 	X. Signature X. Control Control of Addressee
 so that we can return the card to you. Attach this card to the back of the maliplece, or on the front if space permits. 	B. Received by (Printed Name) C. Date of Delivery
1. Article Addressed to:	D. is delivery address different from them 1? ☐ Yes If YES, enter delivery address below: ☐ No ○
Deborah Babinec 6340 Lake Ridge Court	ase 1:02
Loveland, OH 45140	3. Service Type A Certified Mail
	4. Restricted Delivery? (Extra Fee)
Article Number 7001 2510 0	3 E848 84E9 BOOO 0152 1002
S Form 3811, August 2001 Domestic Re	Domestic Return Receipt 102595-02-M-1540